# 2021 ANNUAL REPORT DATA SUPPLEMENT



## **About This Data Supplement**

Data Supplement to the 2021 Annual Report

The City of Milwaukee Health Department's Annual Report is comprehensive and includes information on each division, office, and program within the department. As a result, the report is dense with information. Unlike traditional annual reports, the report is most useful when used as a reference document to learn about a specific division, office, or program within the department.

For the 2021 Annual Report, the City of Milwaukee Health Department has implemented a new format that includes a condensed main report highlighting key program indicators, with a separate data supplement that includes detailed data tables by program. The main 2021 Annual Report and Data Supplement can be found online at https://city.milwaukee.gov/Health/Reports-and-Publications.

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## Community Healthcare Access Program

### **2021 Annual Report Data Supplement**

#### **Performance Measures**

This service enrolls undocumented mothers in insurance coverage that lasts through delivery.

This is the highest we have seen thus far with Marketplace Insurance, particularly because of the new partnerships developed during open Enrollment.

Measure		2017	2018	2019	2020*	2021
# of individuals who complete plications for Badger Care Plu	-	3,873	3,309	1,638	405	99
# of express enrollments in Ba Care Plus - Children	adger	13	10	54	1	1
# of express enrollments in Ba Care Plus - Women	adger	30	20	30	1	0
# of Non-Qualified Immigrant nant Women enrolled in Badg Care Plus		86	57	63	24	22
# of childless adults enrolled i Badger Care Plus	n	907	880	158	64	18
# clients enrolled in Family Planing Only Services (FPOS)	an-	304	435	89	23	12
# EBD (Elderly, Blind, Disabled Medicaid applications	1)			77	17	10
# of Marketplace insurance a cations	opli-			0	14	55
# of enrollment events				172	58	133
# of requests for technical ass tance (application support)	iis-	3,933	5,602	3,173	1,514	1,308
# of new Community Based O zation partnerships	rgani-	5	4	8	1	1
# of Food Share applications a renewals	and	1,161	834	1,735	566	431

<sup>\*2020</sup> data includes full applications and renewals (express enrollments not included). Due to COVID-19 impacting clinic and outreach operations these numbers are significantly outside of the norm and not reflective of traditional outcomes

# Women, Infants, and Children Nutrition (WIC)

### **2021 Annual Report Data Supplement**

Measure	2017	2018	2019	2020	2021
# of participants	86,515	88,197	86,053	88,846	87,269
# of nutritional lessons provided to participants	5,075	5,441	6,025	5,079	10,590
# of referrals	722	1,155	3,412	2,566	6,365
# of "voluntary" lead screens for children enrolled in WIC	3,124	3,278	3,028	1,591	N/A
# of lead water filters distributed	549	209	87	30	N/A
# of WIC benefits distributed (Dollar Amounts Redeemed)	\$3,778,555	\$3,823,696	\$3,386,350	\$3,040,441	\$2,329,660
% of Farmers Market vouchers used of those distributed (Total Checks/Dollar Amount Used)	40%	40%	40%	33%	31%
% of Farmers Market vouchers used of those distributed (Some of All of Checks/Dollar Amount Used)	87%	83%	83%	90%	100%
# of infants enrolled in WIC whoever breastfed	1,211	1,219	1,217	976	990
% of infants enrolled in WIC whoever breastfed <sup>1</sup>	57%	57%	57%	49%	55.2%
# of infants breastfed through 3 months <sup>2</sup>	213	212	226	236	281
% of infants breastfed through 3 months <sup>3</sup>	42%	42%	39%	37%	41.1%
# of infants enrolled in WIC who exclusively breastfed at 3 months <sup>4</sup>	67	58	69	60	51
% of infants enrolled in WIC who exclusively breastfed at 3 months <sup>5</sup>	17%	15%	15%	14%	10.3%

<sup>[1]</sup> Denominator is the total number of infants on WIC born during the same period.

<sup>[2]</sup> This includes all infants who reached the age of 3 months within the year, and had breastfeeding documented as "Yes" at the time they turned 3 months. It also includes infants who BF past 3 months of age.

<sup>[3]</sup> Denominator is all infants on WIC who turned 3 months during the year

<sup>[4]</sup> This includes all infants who reached the age of 3 months of age within the year, and were documented as exclusively BF at 3 months of age. It also includes those infants who exclusively BF past 3 months of age

<sup>[5]</sup> Denominator is all infants on WIC who turned 3 months during the year and ever breastfed

# **Direct Assistance for Dads (DAD)**

### **2021 Annual Report Data Supplement**

#### **Performance Measures**

COVID continued to change how home visits were completed in 2021. Following safety protocol & model guidance, visits were offered virtually, telephonically and in person.

Measure	2017	2018	2019	2020*	2021
# of referrals received by DAD Project	50	83	51	14	53
# of successful face-to-face visits by DAD Project staff	369	430	198	142	125
# of newly enrolled families	21	46	21	10	22
# of families enrolled in program (cumulative)	41	64	44	23	36
# of caregivers enrolled	41	64	44	23	36
# of children enrolled	38	53	37	22	32
# of families who left through attrition (did not complete full program)	15	17	30	9	20
# of families who completed program	4	5	2	1	2
% of primary caregivers screened for depression within 3 months of enroll- ment (if not enrolled prenatally) or within 3 months of delivery (if en- rolled prenatally)	77%	71%	77%	38%	71%
% of children who received the last recommended visit based on the American Academy of Pediatrics schedule	100%	88%	88%	73%	100%
% of primary caregivers who reported using tobacco at enrollment and were referred to tobacco cessation counseling/services within 3 months of enrollment	0%	13%	0%	0%	0%
# of ASQ-3 screenings completed	10	12	14	12	4

# Direct Assistance for Dads (DAD)

### **2021 Annual Report Data Supplement**

Measure	2017	2018	2019	2020*	2021
% of primary caregivers who receive an observation of caregiver-child interaction by the home visitor using a validated tool	1	13	10	6	5%**
% of children screened who need monitoring	0%	27%	21%	17%	33%
% of children screened who need a referral	20%	0%	0%	17%	33%
# of father group meetings	2	9	2	3	6
% of primary caregivers who are screened for intimate partner violence (IPV) within 6 months of enrollment using a validated tool	1	11	56%**	100%**	100%
% of primary caregivers with positive screens for intimate partner violence (IPV) who receive referral information to IPV resources	0% screened positive	0% screened positive	0% screened positive	0% screened positive	0%
% of primary caregivers who had continuous health insurance coverage for at least 6 consecutive months	7	9	89%**	78%**	100%**

<sup>\*\*</sup>Measurement shifted from the number to percentage for outcomes measurement purposes

# Birth Outcomes Made Better (BOMB) Doula

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Measure	2017	2018	2019	2020*	2021
# of referrals received				1	92
# of newly enrolled families				1	79
% of births where doula was present/supporting				100%	68%
% of clients where a medical home/provider was established				100%	100%
% of clients residing in high infant mortality zip codes				100%	27%
% of infants (among mothers who enrolled prenatally before 37 weeks) who are born preterm fol- lowing program enrollment				0%	13%
% of infants (among mothers who enrolled prenatally) who were breastfed any amount within 3 months of age				100%	66%
Percentage of clients needing Translation				N/A	13%

# **Empowering Families of Milwaukee**

### **2021 Annual Report Data Supplement**

#### **Performance Measures**

Measure	2017	2018	2019	2020*	2021
# of referrals received	46	143	191	34	46
# of newly enrolled families	18	66	76	23	33
# of caregivers enrolled	122	124	151	118	122
New clients enrolled prenatally	17	41	59	20	23
Clients enrolled in 1 <sup>st</sup> trimester	0	0	3	2	2
Clients enrolled in 2 <sup>nd</sup> trimester	3	20	20	7	12
Clients enrolled in 3 <sup>rd</sup> trimester	14	21	37	11	9
# of children enrolled	146	130	147	124	131
# of successful face-to-face visits made by EFM Program staff	2,708	2,769	1,921	1,473	1,757
Families who left through attrition (did not complete program)	27	44	37	16	19
Families who successfully completed the program	13	42	19	13	9
% of infants (among mothers who en- rolled prenatally before 37 weeks) who are born preterm following program enrollment	28%	14%	5%	10%	30%
% of infants (among mothers who en- rolled prenatally) who were breastfed any amount at 6 months of age	35%	17%	37%	29%	31%
% of primary caregivers screened for depression within 3 months of enrollment (if not enrolled prenatally) or within 3 months of delivery (if enrolled prenatally)	68%	54%	52%	46%	68%
% of children who received the last rec- ommended visit based on the American Academy of Pediatrics schedule	65%	80%	90%	72%	84%

COVID changed how home visits were completed in 2020 and 2021. Following safety protocol & model guidance, visits were offered virtually, telephonically and in person

# **Empowering Families of Milwaukee**

### **2021** Annual Report Data Supplement

#### **Performance Measures**

Measure	2017	2018	2019	2020*	2021
% of mothers enrolled prenatally or within 30 days after delivery who received a postpartum visit with a healthcare provider within 8 weeks of delivery	53%	53%	73%	57%	50%
% of primary caregivers who re- ported using tobacco at enroll- ment and were referred to tobac- co cessation counseling/services within 3 months of enrollment	0%	0%	29%	0%	50%
# of mental health screenings for depression for mothers (Edinburgh Postnatal Depression Scale (EPDS)	81	70	93	53	48
% of infants that are always placed to sleep on their backs, without bed-sharing or soft-bedding	63%	52%	30%	15%	17%
% of children who were breastfed any amount since birth	22%	17%	25%	78%	91%
% of primary caregivers who receive an observation of caregiverchild interaction by the home visitor using a validated tool	104%	96%	63%	35%	71%
# of ASQ-3 screenings completed	190	142	100	160	177
% of children screened who need monitoring	52%	50%	33%	19%	42%
% of children screened who need a referral	22%	19%	18%	11%	23%
% of primary caregivers who are screened for interpersonal violence within 6 months of enrollment using a validated tool	28%	32%	90%	85%	91%
% of primary caregivers who had continuous health insurance coverage for at least 6 consecutive months	52%	67%	88%	96%	92%

This is a significant growth in breastfeeding rates. EFM's staff have increased # of staff training to be CLC certified.

The Ages and Stages Questionnaire (ASQ) is a developmental screening that helps identify potential delays. Children with developmental delays are connected with appropriate services by program staff.

# **Infant Mortality Special Initiatives**

**2021 Annual Report Data Supplement** 

Measure	2017	2018	2019	2020	2021			
Cribs for Kids								
# of referrals to Cribs for Kids/Safe Sleep Clinic	946	909		525	487			
# of families that met eligibility requirements and were registered for Safe Sleep Clinic	808	695		482	393			
# of participants			587	412	382			
# cribs distributed	756	651	611	386	401			
# of families that completed safe sleep edu- cation and received PnPs at Safe Sleep Clinic	640	602	519	356	312			
# of families enrolled in home visitation program and received education and PnP in home	96	49	92	30	38			
# of safe sleep training sessions			869	58	273			
% of cribs distributed in ZIP codes with a high prevalence of infant mortality	79%	79%	78%	82%	75%			
Strong Baby Title V Program								
# of educational trainings/groups provided to community				106	58			

# Parents Nurturing and Caring for Their Children and Newborn Screening

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#### **Performance Measures**

Measure	2017	2018	2019	2020	2021
# of new referrals received	88	102	133	71	73
# of new clients enrolled	49	46	50	30	45
% of families and clients who were re- ferred and then enrolled	56%	45%	38%	42%	62%
# of clients who successfully completed program	20	25	26	23	26
# infants born and enrolled in PNCC	35	34	41	27	36
# of infants enrolled in PNCC born before 37 weeks	2	1	6	4	3
% of infants enrolled in PNCC born before 37 weeks	6%	29%	15%	15%	8%
# of singleton babies born weighing less than 2500 grams (low birth- weight)	4	1	3	3	3
# of mothers in PNCC who initiated breastfeeding	25	21	35	18	22
% of mothers in PNCC who initiated breastfeeding	71%	62%	85%	66%	61%
# of ASQ screenings completed for families enrolled		117	25	22	26
# of mental health screenings for depression for mothers (Edinburgh Postnatal Depression Scale (EPDS))		162	73	62	91
# of referrals to mental health services (based on EPDS score and/or other referrals made for mental health services, e.g., anxiety)		7	4	0	15
% of families referred based on EPDSs Screenings			5%	0%	16%

The Ages and Stages Questionnaire (ASQ) is a developmental screening that helps identify potential delays. Children with developmental delays are connected with appropriate services by programs staff.

# Parents Nurturing and Caring for Their Children and Newborn Screening

2021 Annual Report Data Supplement

#### **Performance Measures**

Measure	2017	2018	2019	2020	2021				
Newborn Hearing Screening									
# of referrals received	171	347	415	1,074	922				
Average # of babies case managed per month	70	119	135	318	305				
# of babies screened by Regional Outreach Specialist	43	37	56	14	6				
# of babies with confirmed hearing loss by audiology	3	32	29	114	41				
Congenital Disorders Screening									
# of NBS referrals received from the newborn screening	88	109	103	90	140				
# of infants identified with sickle cell through NBS and were case managed	18	17	12	26	11				
# of infants identified with cystic fibrosis through NBS and were case managed	3	14	2	0	1				
% of infants that were triaged within 2 days of receiving referral (goal 95%)		98%		100%	100%				
% of infants identified with a sickling disorder on newborn screening seen at CHW by four months of age (goal 95%)	100%	100%	100%	100%	100%				

The number of cases can fluctuate year to year depending on the number of cases who missed their initial hearing screening. All babies that were screened were successfully case managed and provided access to appropriate care.

# Office of Violence Prevention

### **2021 Annual Report Data Supplement**

#### **Performance Measures**

Measure	2017	2018	2019	2020	2021
Community Engagement					
# of community engagement events and	21	28	24	105	100
# of copies of Blueprint for Peace distributed	500	400	3,250	2,500	2,000
# of Facebook followers (cumulative)	828	1,699	5,513	6,734	7,000
# of 414Life website views		7,824	14,034	13,979	17,631
# of OVP website unique views			16,641	18,542	15,614
Trauma Response Initiative					
# of referrals received	236	327	466	217	270
# of families engaged	212	182	272	89	194
Safe Visitation and Exchange	_		_	_	
# of families served	74	60	70	23	22
# of supervised exchange services provided	404	386	637	100	90
# of one-to-one supervision services pro- vided	352	348	762	148	0
Milwaukee Commission on Domestic Violence 8	k Sexual Ass	ault			
# of agencies and organizations engaged	58	72	85	87	92
# of Commission meetings	10	11	11	10	10
Completed trainings of current Officers/ recruits of MPD	Yes	Yes	Yes	Yes	Yes
Family Violence Prevention					
Emergency referrals & Assistance					27
# community engagements efforts/events # of community engagements efforts/	22	26	42	31	22
414Life Violence Interruption					
# of violence interruptions		14	67	63	66
# of participants		16	56	54	28

Families engaged include families that a trauma Response member made contact with through phone calls or home visits.

This program began in November 2018, so 2018 figures reflect two months of service.

# Office of Violence Prevention

### **2021 Annual Report Data Supplement**

#### **Performance Measures**

Measure	2017	2018	2019	2020	2021	
Suicide Prevention						
# of suicide prevention train- ings				26	22	
# of community members trained				671	623	
# of gun locks distributed					10,000	
Coaching Boys to Men						
# of coaches		23	23	0	0	
# of student athletes		180	180	0	0	
ReCAST MKE						
# of youth and families served	189	2,063	4,578	1,958	1341	
# of adults trained		306	403	753	79	
# of organizations receiving funding or subcontracts	6	49	29	31	10	

The suicide prevention trainings added to OVP's scope of work after the Community Health Liaison joined the OVP

The Coaching Boys to Men trainings did not take place in 2020 due to the COVID-19 pandemic causing programming at Milwaukee Public Schools to be halted. Subsequently, OVP was cut short staffed when school returned inperson.

# **Consumer Environmental Health**

### **2021 Annual Report Data Supplement**

#### **Performance Measures**

Measure	2017	2018	2019	2020	2021
Food	Inspection			•	
Routine inspections	3,626	2,697	2,633	999	1649
% of routine inspections with one or more priority violations	34%	41%	42%	44%	37%
30 day inspections		357	318	140	265
Pre-inspections		537	430	383	481
Complaints	577	701	829	641	551
Revenue generated (Food Inspection)	\$2,499,221	\$2,199,443	\$2,109,897	\$426,619	\$1,935,946
	Food Sampling				
# of samples tested	144	468	On hold in 2019	On hold in 2020	On hold in 2021
Violation rate	19%	14%	-	-	-
Te	mporary Event	ts			
# of inspections	615	603	532	4	290
# of priority violations	207	182	88	0	106
Mo	bile Restaurar	its			
# of total mobile inspections	322	315	530	127	224
% of mobile routine inspections with a priority violation	15%	34%	32%	47%	13%
Food Safe	ty Education &	Outreach			
# of operator training sessions performed	341	381	325	53	149
# of food handlers trained	1,463	1,378	1,312	185	300
Ta	ittoo & Body A	rt			
# of tattoo/body art inspections	186	215	50	60	36
Total # of violations for routine inspections	107	56	56	22	31
Revenue generated (Tattoo & Body art licenses)	\$14,718	\$19,009	\$13,569	\$1,099	\$18,198
	ights & Measu				
# of devices or inspections tested	1,505	1,081	865	737	1123
Revenue generated (Weights & Measures)	\$388,827	\$429,080	\$337,452	\$79,114	\$351,197

Sterilization related violations continue to decrease as the tattoo and body art industry has transitioned to presterilized, disposable needles and ink tubes.

## **Consumer Environmental Health**

#### **2021 Annual Report Data Supplement**

#### **Performance Measures**

#### POPULATION HEALTH OUTCOMES

Cases Reported	2017	2018	2019	2020	2021	Three Year Av- erage	Estimat- ed # of Cases Per Case Re- ported <sup>*</sup>	Total Es- timated Cases 2021	Total Esti- mated Cases Three Year Aver- age
Campylobacter	62	58	99	46	67	71	30	2,010	2,130
E. coli 0157	7	14	13	1	12	9	26	312	234
Listeria	1	0	0	0	0	0	2	0	0
Salmonella	75	99	75	52	69	65	29	2,001	1,885
Vibrio	4	0	1	1	2	1	142	284	142
Yersinia	2	1	0	2	2	1	123	246	246

City of Milwaukee enteric disease cases from Wisconsin Electronic Disease Surveillance System on January 6, 2020. Please note that data are provisional and subject to change.

\*FoodNet Progress Report https://www.cdc.gov/features/dsfoodnet2012/food-safety-progress-report-2012-508c.pdf

Incidence per 100,000 <sup>1</sup>	2017	2018	2019	2020	2021	Three Year Aver- age	Healthy People 2030 Tar- get <sup>2</sup>	Healthy People 2030 Status <sup>3</sup> (met or not met)
Campylobacter	10.4	9.8	16.6	7.7	11.6	12.0	10.9	Not met
E. coli 0157	1.2	2.4	2.2	0.2	2.1	1.5	3.7	met
Listeria	0.2	0.0	0.0	0.0	0.0	0.0	0.22	met
Salmonella	12.6	16.6	12.6	8.7	12.0	11.1	11.5	Not met
Vibrio	0.7	0.0	0.2	0.2	0.3	0.2	n/a	n/a
Yersinia	0.3	0.2	0.0	0.3	0.3	0.2	n/a	n/a

<sup>[1]</sup> Incidence calculated using 2010 U.S. Census Population data.

Please note\* CDC did not include vibrio or Yersinia in the Healthy People 2030 goals

<sup>[2]</sup> Food Safety, Healthy People 2020 http://www.healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=14

<sup>[3]</sup> Based on comparison between 2020 City of Milwaukee incidence with 2020 target.

## **Home Environmental Health**

### **2021 Annual Report Data Supplement**

#### **Performance Measures**

Measure	2017	2018	2019	2020	2021
	Lead Haza	rd Reductio	n		
# of Lead Inspections completed	251	205	204	79	93
# of Risk Assessments Completed	232	209	203	77	121
# of permits issued	291	192	220	250	282
# of MHD final clearances	386	152	156	101	140
# of families provided relocation services		Not availa- ble	60	53	62
# of orders issued	22	163	191	82	284
	Healthy	Homes			
# of Healthy Homes Assessments completed			50	45	76
Lead	Surveillan	ce and Resp	onses		
# of EBL outreach letters sent	1,891	2,350	3,952	2,078	2,042
# of new children referred for nurse case management	70	88	71	48	87
# of children requiring chelation *9 new children		21	10	7	16*
# of chelation events		23	13	9	23
# of nurse cases closed		31	118	84	82
# of nurse case management outreach interventions			2,628	4,663	7,7,87
# of initial developmental screenings completed by nurse			153	187	71
	Water Qu	ality Testing	5		
# of water samples collected from child- care facilities	1,252	80	164	128	81
# of water samples collected from chartered schools		411	389	741	344
# of water filters distributed	1,965	1,537	2,610	392	1118
	Division I	Metrics			
Total combined revenue generated from lead billing	\$2,970	\$50,507	\$95,200	\$54,650	\$50,761
Revenue generated from environmental investigation billing	\$2,102	\$45,163	\$86,300	\$48,9000	\$81,975
Revenue generated from case management billing	\$867	\$5,344	\$8,900	\$5,650	\$8,925
Number of outreach events attended	48	43	36	4	12

Due to the COVID-19 pandemic, home visits and inspections were placed on hold from March16-June 8, 2020

Childcare water sample collection is done in partnership with Milwaukee Water Works (MWW).

Water filter distribution is primarily conducted inperson. Due to the COVID-19 pandemic this in–person work was limited.

# **Home Environmental Health**

**2021 Annual Report Data Supplement** 

#### **Performance Measures, Continued**

Measure	2017	2018	2019	2020	2021
Lead Epidemiology					
Total # of reported tests	36,604	37,907	34,493	24,019	23,530
Total # of children tested	26,797	27,779	26,134	19,766	19,983
Total # of reported tests for children under 72 months	34,613	34,186	32,933	22,959	22,620
Total # of children under 72 months tested	25,051	24,388	24,736	18,829	19,175
Total # of Children Under 72 Months – 5-9.9 μg/dL	1,865	1,658	1,368	855	760
Total # of Children Under 72 Months – 10-14.9 μg/dL	385	316	271	195	162
Total # of Children Under 72 Months – 15-19.9 μg/dL	150	115	106	73	65
Total # of Children Under 72 Months – 20-39.9 μg/dL	124	99	101	66	60
Total # of Children Under 72 Months – Greater than 40 μg/dL	26	24	14	11	18
Rate of Children Under 72 Months – Greater than 5 μg/dL	10.2%	9.1%	7.7%	6.4%	5.4%
Rate of Children Under 72 Months – Greater than 10 μg/dL	2.7%	2.3%	2.0%	1.8%	1.7%
% of Children 12 to 35 Months of Age with at least 1 Lead Test	70.6%	73.2%	70.3%	58.7%	57.8%

State of Wisconsin DHS has presented revised blood lead data from 2018 to 2020.

# **Emergency Preparedness and Environmental Health**

#### **2021 Annual Report Data Supplement**

Measure	2017	2018	2019	2020	2021
% of employees who have completed required Incident Command System (ICS) training		85%	91%	90%+	90+%
% of staff successfully receiving exercised emergen- cy notification messaging		86%	95%	90%	85%
# of emergency preparedness exercises completed				10	Active Re- sponse
Public Health Emergency Operations Plan (EOP) reviewed and updated		Yes	Yes	Yes	Yes
% of employees scheduled for fit testing who were fit tested*		88%	91%	See new metric be- low	52%
% of staff slated for fit testing who had completed a fit test within a calendar year (as of 5-21-21)				76%	
# of staff respirator fit tests completed*				42	56
# of National Guard members fit tested for COVID-19 response				48	
# of Safety Committee Meetings conducted				11	17
# of facility chemical storage plans reviewed as part of the Local Emergency Planning Committee (LEPC)		7	42	25	64
# of DNC planning committee meetings facilitated				80	
# of days cooling/warming shelter open				4	0
# of needle/infectious waste removals completed				60	60**
# of smoke detectors installed during neighborhood canvassing***					584

<sup>\*</sup> Due to COVID-19, many job titles were added to the list of job titles to be respirator—trained/fit tested at various points throughout the year. Coordinating with pro grams to process these new people through the full protocol necessary to perform a fit test (Medical Evaluation, OSHA-mandated training, scheduling) is in various stages for different programs. Programs with staff previously or newly slated for respirator-training/fit testing have adopted or extended administrative or engineering controls (e.g., suspending some client services, physically ensuring six foot or greater distancing in client interactions) in lieu of N-95 use.

<sup>\*\*</sup> Estimate includes small (0 – 12 needles recovered) to medium and large-scale clean-ups, including large homeless encampments and small parks with up to hundreds of needles recovered at a single event. Staff participating ranged from one to six people.

<sup>\*\*\*</sup>Work conducted as part of neighborhood canvassing program performed to promote and provide COVID-19 vaccinations.

# **Infectious Disease Program**

### **2021 Annual Report Data Supplement**

Measure	2017	2018	2019	2020	2021
Communicable Disease (CD) Control					
# of cases of CD reported*	2,995	3,124	3,262	2,893	3,891
# of CD cases followed-up by CD Program	1,088	1,046	1,079	447	750
# of outbreaks investigated**	41	34	19	10	2
Tuberculosis (TB) Control					
# of x rays performed	253	224	192	123	171
# of x rays read for TB Clinic	254	239	202	125	171
# of TB clinic visits	380	398	463	236	266
# of Directly Observed Therapy home visits	1,907	1,287	2,008	670	1,023
# of refugees provided follow up service (screenings/TB care)	11	39	23	11	13
# of cases of tuberculosis	10	16	14	9	11
# of cases of multi-drug-resistant TB	0	1	0	0	0
# of clients provided TB case manage- ment	10	16	14	9	11

<sup>\*</sup>These numbers do not include COVID-19, influenza associated hospitalizations, tuberculosis, or sexually transmitted infections.

<sup>\*\*</sup>Includes non-COVID-19 respiratory and gastrointestinal outbreaks

# **Infectious Disease Program**

**2021 Annual Report Data Supplement** 

#### **Performance Measures**

Measure	2017	2018	2019	2020	2021	
Immunizations						
# of clients immunized*	2,905	2,208	2,479	4,278	3,135	
# of immunizations provided*	8,271	5,921	6,859	4,818	3,771	
# of offsite clinics	23	28	17	0	0	
# of school / childcare education sessions provided	5	4	3	0	0	
# of two-year-old reminder/recall letters mailed	3,207	3,456	3,612	988	0	
% of two-year-olds in the City of Milwaukee who are up to date on their immunizations by 24 months of age	66%	62%	62%	58%	57%	
% of children in compliance with school required immunizations	92%	92%	91%	92%	83%	

<sup>\*</sup>These numbers do not include COVID-19 vaccinations

#### **FLU VACCINATION MEASURES**

Measure	2017-2018	2018-2019	2019-2020	2020-2021
Flu Vaccination Rates - 18 years and older	26%	31%	34%	36%
Flu Vaccination Rates – 65 years	47%	54%	59%	63%

# Sexual and Reproductive Health

**2021 Annual Report Data Supplement** 

#### **Performance Measures**

#### **INTERVENTION MEASURES, specific to Keenan Health Center**

Measure	2017	2018	2019	2020	2021
# of clients served	5,123	4,214	5,262	5,415	5,390
# of persons tested for STIs	4,361	3,645	4,486	4,425	5,350
# of persons turned away due to clinic capacity limitations	639	909	520	393	118
# of HIV tests conducted	3,593	3,087	3,581	3,367	3,370
# of persons who were offered a PrEP referral to prevent HIV transmission	166	147	1,019	1,040	912
# of condoms distributed	62,000	67,500	19,000	100,000	92,000
# of persons provided Plan B emergency contraception	148	250	363	155	278

## OUTCOME MEASURES, specific to Keenan Health Center/Sexual Reproductive Health Program unless otherwise specified

Measure	2017	2018	2019	2020	2021
# of positive HIV tests	48	28	34	45	39
# of positive gonorrhea tests	2,061	1,510	1,930	1,967	1,601
# of positive syphilis tests	412	364	519	594	688
# of STI/HIV cases assigned for case management (Chlamydia, Gonorrhea, Syphilis, and HIV follow-up)	973	671	915	1,109	1,036
# of new HIV infections identified in the City of Milwaukee	117	109	106	97*	100*
# of cases of gonorrhea in the City of Milwaukee	4,378	4,202	4,686	4,786	5,072
# of cases of primary and secondary syphilis in the City of Milwaukee	66	57	97	192	445
# of cases of chlamydia in the City of Milwaukee	9,712	9,870	10,343	9,405	9,623

<sup>\*</sup>Preliminary count, data is subject to change

## Sexual and Reproductive Health

**2021 Annual Report Data Supplement** 

#### **Performance Measures**

#### **CUSTOMER AND COMMUNITY IMPACT MEASURES**

Measure	2017	2018	2019	2020	2021
% of HIV cases linked to care within 1 month of diagnosis <sup>a</sup>	73% <sup>b</sup>	81% <sup>c</sup>	78% <sup>c</sup>	81% <sup>c,d</sup>	74% <sup>c, d</sup>
% of cases receiving case management for STIs that were successfully treated	87%	85%	89%	92%	92%

<sup>&</sup>lt;sup>a</sup>Data source: Wisconsin Department of Health Services, City of Milwaukee HIV Surveillance Reports

<sup>&</sup>lt;sup>b</sup>Reflects laboratory data received through March of the following year

<sup>&</sup>lt;sup>c</sup>Reflects laboratory data received through April of the following year

<sup>&</sup>lt;sup>d</sup>Preliminary count, data is subject to change

# **Well Woman Program**

### **2021 Annual Report Data Supplement**

#### **Performance Measures**

Measure	2017	2018	2019	2020	2021
Screening Objective – Unduplicated per State – grant period is 7/1/2020 to 6/30/2021. The objective has been increased to 900 for 7/1/2021 to 6/30/2022	700	950	900	700	900
Milwaukee residents ages 35- 64 years screened for breast and cervical cancer (unduplicated)	999	929	1,057	885	1,121
Total number of breast cancer screenings	803	901	1,008	792	838
Breast screenings, in-house (mammograms and clinical breast exams only)	478	453	474	365	327
Breast screenings, provider	325	448	544	427	511

The objective was reduced in 2020 due to a decrease in funding from the CDC to the state of Wisconsin.

Measure	2017	2018	2019	2020	2021
Total number of cervical cancer screenings	164	98	74	75	89
Cervical screenings, in-house	160	98	71	71	84
Cervical screenings, provider	4	0	3	4	5
Case management encounters	10,468	7,327	8,487	8,155	8,212
WISEWOMAN clients enrolled	297	82	78	0	0
Number of community events	18	13	21	0	0

MHD no longer receives funding to provide these services.

MHD was unable to conduct any community events due to the COVID-19 pandemic.

# Milwaukee Health Department Laboratory

### **2021 Annual Report Data Supplement**

#### **Performance Measures**

MHDL continued to serve as a reference lab for SARS-CoV-2 testing for high risk underserved populations; supporting outbreak investigations and point of care test sites.

MHDL continues its excellence surveilling for drug resistant Gonorrhea with local and state STI partners. Labs capacity building to become a GC-AST Center of Excellence.

MHDL maintained all clinical and environmental testing services despite being heavily occupied by COVID-19 response. This was achieved by cross-training lab

MHDL helped support Milwaukee Water Works lead service line replacement program by providing lead water testing at childcares.

Measure	2017	2018	2019	2020	2021
Tests Performed: Communicable	e Diseases				
Respiratory pathogens	634	666	687	386	562
SARS-CoV-2 (COVID-19)				26,649	14,028
Gastrointestinal pathogens	382	272	210	215	260
Syphilis	7,272	6,342	7,318	5,838	6,900
Chlamydia	13,428	11,817	13,709	10,350	11,562
Gonorrhea	16,999	16,386	18,266	13,532	14,024
Mycoplasma	N/A	N/A	1,596	1,288	1,722
Trichomonas	5,285	4,363	4,528	4,365	5,295
HIV	3,725	3,163	3,698	3,415	3,586
Herpes	499	421	364	283	354
Other (Clinical/	390	260	212	553	568
Tests Performed: Environmenta	l Health				
Lead in Dust wipes, Paint,	8,289	5,780	6,137	3,956	6,931
Lead in Water	859	1,425	1,428	979	514
Summerfest Water (Potable)	649	630	613	0	601
Beach Water	273	191	175	147	140
Water Treatment Plant (raw and finished water- Potable; Cryptosporidi- um, Giardia and cultura- ble viruses)	89	95	72	86	98
Harmful Algal Blooms		84	44	15	15
Other (Environmental/ Refer- ence)	288	205	439	414	130

## Milwaukee Health Department Laboratory

**2021 Annual Report Data Supplement** 

#### **Performance Measures**

Due to the limited ability for in-person meetings, MHDL hosted two virtual events: PHL Career Exploration (with MPS) and Environmental System Improvement with systems partners.

Measure	2017	2018	2019	2020	2021
# of laboratory system partner events hosted	1	2	3	0	2
# of LRN Activities- Bio-threat Detection (included proficiency testing)	25	24	24	11	14
# of conferences, meetings & trainings attended	19	30	24	10	12
# of active grants	3	6	7	9	13
# of grant applications submitted	3	8	8	8	9
# of grants applied for awarded	2	4	4	4	8

MHDL collaborated with local COVID-19 reference laboratories, MMHD and community point of care testing sites to perform SARS-CoV-2 variant sequencing. Several new technologies were onboarded to meet the demands

MDHL implemented an online portal for test order requests and resulting viewing capacity for partner locations

Measure	2017	2018	2019	2020	2021
# of positive HIV cases reported	34	22	28	20	23
# of resistant Gonorrhea identified	11	23	151	173	117
# Mycoplasma genitalium infections detected			354	351	380
# of clients using self-collect option at Sexual Health Clinic			82	692	567
# of COVID samples sequenced				209	2,098
# of water samples with elevated lead (5 and up)	53	174	95	78	76
# of new partners testing ser- vices provided	2	12	5	42	3
# of certifications maintained*	6	7	7	7	7
# of successful regulatory inspections	3	3	3	3	3

<sup>\*</sup>The following certifications are currently maintained: Clinical Laboratory Improvement Amendment (CLIA) certificate of compliance (ZMB, KHC and SSHC locations), Wisconsin Department of Agriculture, Trade & Consumer Protection (DATCP) Milk, Food and Water Lab certification, Wisconsin Department of Natural Resources (DNR) – Lead in Water certification, American Industrial Hygiene Association Laboratory Accreditation Programs (AIHA-LAP, LLC) – Environmental Lead certification, CDC Environmental Legionella Isolation Techniques Evaluation (ELITE)

# Milwaukee Health Department Laboratory

**2021 Annual Report Data Supplement** 

#### **Performance Measures**

#### **CUSTOMER AND COMMUNITY IMPACT MEASURES**

Measure	2017	2018	2019	2020	2021
# of clients/partners served	45	53	51	96	70
# of new tests validated	0	4	4	8	5
# of residential soil samples tested	18	55	104	82	120
Monthly e-reports to clinical part- ners & stakeholders (12 per calen- dar year) on laboratory surveil- lance	100%	100%	100%	100%	100%
# of lab tours conducted	16	15	21	10	8
# of academic internships hosted	7	8	4	4	7
# of presentations, posters & publications	8	9	11	12	20
Fee for Service Revenue	\$334,766.11	\$301,047.37	\$401,068.00	\$267,548	\$151,053.85
Reimbursement Revenue	\$425,319.60	\$489,418.46	\$324,867.71	\$91,780.71*	\$356,819.55

The reduction in fee for service revenue is largely due to reduced testing needs from the WSLH.

## Policy, Innovation, and Engagement

### **2021** Annual Report Data Supplement

Measure	2017	2018	2019	2020	2021					
General Performance										
# of data dashboards maintained (internal and public-facing)	2	2	2	15	18					
# of legislative policies consulted on		29	22	11	5					
# of unique Common Council Committee & Task Force appear- ances			113	115	93					
Community Health Improvement Pla	an, MKE Elevat	e								
# of Steering Committee and Pri- ority Action Team meetings held	4	3	0	1	19					
# of organizations actively re- engaged				100+	80					

### Policy, Innovation, and Engagement

### **2021** Annual Report Data Supplement

#### **Performance Measures**

Measure	2017	2018	2019	2020	2021				
Academic Health Department									
# of active Academic Affiliation Agreements		6	15	19	21				
# of student placements at MHD	47		50+	80+	110+				
Departmental and City-Wide Plans Comple	ted								
Community Health Assessment completed within last 5 years	Complete	Complete	Complete	Drafted	Drafted				
Community Health Improvement Plan completed within the last 5 years	Complete	Complete	Complete	Complete	Complete				
A quality improvement plan reviewed / completed within the last 5 years	Complete	Complete	Complete	Complete	Complete				
A departmental strategic plan completed within the last 5 years		Drafted	Drafted	Drafted	In Progress				
Substance Misuse Initiatives									
Number of community partner workgroup meetings held		4	3	8	12				
Number of prevention efforts imple- mented		2	3	5	5				
Number of Narcan kits distributed* (two doses per kit)				403	582				
Number of community presentations facili-				2	3				
Number of press related events held				5	4				
Engagement									
# of MHD website views	48,305	40,396	37,584	108,954	401,049				
# of MHD Facebook page followers*		655	1,085	6,637	9,560				
# of MHD Facebook page engaged users (total # of users who have interacted with the page and its posts)*			9,093	34,714	106,720				
# of new MHD Twitter followers		143	162	754	554				
# of tweets published	54	110	236	461	367				
# of MHD Twitter engagements (total # of times a user interacted with a tweet)	749	3,000	3,368	4,921	38,582				

In October 2019, MHD began hosting monthly Connections to Heal workgroup meetings with community partners in the Substance Abuse Disorder community.

### **Vital Statistics**

### **2021** Annual Report Data Supplement

Measure	2017	2018	2019	2020	2021
Total gross income, cash receipts, and billing	\$411,965	\$458,679	\$404,584	\$535,633	\$594,254
Births registered	9,700	9,318	9,170	8,476	8,241
Deaths registered	4,500	5,928	5,931	7,220	5,075
Total births and death records	54,626	60,100	58,461	69,990	72,821
Death certificates issued	40432	44978	47706	52,649	49,194
Birth certificates cash sales	14,194	15,122	10,755	17,251	23,627
Death certificates cash sales	2,402	3,158	2,486	3,617	3,681
Death certificates via billing to fu- neral directors	38,030	41,820	45,220	49,032	45,513

# **Fetal Infant Mortality Review**

### **2021** Annual Report Data Supplement

Measure	2017	2018	2019	2020	2021 *
# of infant deaths	120	99	77	97	72
Infant mortality rate	12.6	10.8	8.4	11.2	8.8
# of stillbirths	52	59	67	48	48
# of reviews completed	6	5	6	5	6
% maternal interviews completed	10%	11%	10%	0	0
# of partners actively engaged	38	43	41	45	46
% of cases analyzed	100%	100%	100%	80% of 2020 with continuing analysis	45% of 2021 with continuing analysis

<sup>\*</sup>preliminary numbers; will not be reconciled until the end of 2021

# **Fetal Infant Mortality Review**

### **2021 Annual Report Data Supplement**

#### **Performance Measures**

Data needed to update population health outcomes chart									
	Overall	NH Black	NH White	Hispanic/Latinx	Asian	Multiracial			
2013-2015	9.9	14.9	4.6	4.7	7	13.6			
2014-2016	9.1	13.7	5	4.3	4	11.8			
2015-2017	10.5	15.5	5.1	5.8	6.6				
2016-2018	10.8	15.9	5.7	6.2	5.7	9.1			
2017-2019	10.6	15.3	4.4	7.1	5.4	10.4			
2018-2020	10.2	14.9	4.2	7.1	3.8	13.1			
2019-2021*	9.4	14.7	2.6	6.1	5.1	11.9			

<sup>\*2021</sup> data is preliminary

NH: Non-Hispanic

# **COVID-19 Response**

### **2021 Annual Report Data Supplement**

### **Emergency Preparedness and Environmental Health (EPEH)**

Measure	FY 2020	FY 2021
# of total diagnostic tests performed	311,175	127,361
# of tests performed at Claire Hall/MFD testing site	3,127	633
# of tests performed at community testing sites	305,316	124,791
# of tests performed at place-based testing sites	2,574	1,848
# of place-based testing clinics completed	126	94
# of spot-check tests performed	158	89
# of total vaccinations administered		216,853
# of vaccinations administered to homebound clients		955
# of homebound clients served		681
# of vaccinations administered at mass vaccination clinics		195,775
# of vaccinations administered at mobile vaccination clin-		19,414
# of mobile vaccination clinics		568
# of vaccinations administered by neighborhood canvassing		709
# of phone calls to COVID-19 Hotline*	25,408	46,510
# of occupants served by COVID-19 isolation facilities	234	254
# of households served by grocery delivery	1,046	443
# of masks provided to distribution sites**	481,425	20,960
# of COVID-19 hazard assessments completed	46	27
# of COVID-19 subject-matter expert presentations	15	8

<sup>\*</sup>Hotline inception of March 2020, but number of incoming calls was not tracked systemically until end of May 2020

<sup>\*\*</sup>Number is approximate.

# **COVID-19 Response**

### **2021** Annual Report Data Supplement

### **Infectious Disease**

COVID-19 Metrics			
Measure	2020	2021	
# of confirmed cases worked by MHD	40,178	43,667	
# of contact investigations worked by MHD	29,464	21,855	

# **COVID-19 Response**

### **2021** Annual Report Data Supplement

### Policy, Innovation, and Engagement

COVID-19 Communication, Outreach, & Engagement	2020	2021
Responses to emails from public (askmhdcovid19@milwaukee.gov)	9	3,500
# of assists through COVID-19 hotline	29,092	46,510
# of COVID-19 issue briefs published	3	0
COVID-19 data dashboard views (cumulative since 2020)	361,150*	480,065
COVID-19 vaccination dashboard views		367,971
# of data dashboards maintained (internal and public)	13	17
# of MHD COVID-19 website views	195,030	1,580,934

<sup>\*</sup>through May 25, 2021

COVID-19 Mitigation	2020	2021
# of public health emergency orders issued	9	3

# Milwaukee Health Department Finance

Annual Report Data Supplement

MHD program	2021 O&M Expenses	2021 Grant Expenses
Community Healthcare Access Program	\$232,823	\$281,451
Direct Assistance for Dads	\$3,396	\$91,001
Empowering Families of Milwaukee	\$429,773	\$1,162,264
Infant Mortality Special Initiatives (Cribs for Kids, Strong Baby Title V)	\$279,359	\$308,842
BOMB Doula Program	\$295,846	
Parents Nurturing and Caring for Their Children (PNCC) and Newborn Screening	\$707,848	\$237,030
Women, Infants, and Children	\$70,276	\$1,130,430
Office of Violence Prevention	\$693,228	\$998,007
Consumer Environmental Health	\$1,679,797	\$2,369
Home Environmental Health	\$1,033,621	\$4,206,992
Emergency Preparedness and Environment Health	\$94,230	\$934,858
Infectious Disease (Communicable Disease, Tb Control, Immunizations)	\$1,731,619	\$1,272,998
Sexual and Reproductive Health	\$518,221	\$331
Well Woman/MBCCAP	\$60,573	\$752,242
Laboratory Services	\$1,883,499	\$826,517
Policy, Innovation, and Engagement	\$722,323	\$225,401
Vital Statistics	\$153,525	\$1,493
Fetal Infant Mortality Review	\$48,761	
COVID-19 Response	\$3,959,083	\$20,931,633
Total	\$14,597,799	\$33,363,858